



NATIONAL PARTNERSHIP FOR ACTION

to End Health Disparities

Together, we can. Together, we will.

Regional Health Equity Boards

The mission of the **National Partnership for Action (NPA)** is to increase the effectiveness of programs that target the elimination of health disparities through the coordination of partners, leaders, and stakeholders who share the same goals and vision and who are committed to action. The National Plan for Action is one component of the NPA and addresses five goals:

1. **Awareness** -- Increase awareness of the significance of health disparities, their impact on the nation, and the actions necessary to improve health outcomes for racial and ethnic minority populations
2. **Leadership** -- Strengthen and broaden leadership for addressing health disparities at all levels
3. **Health System and Life Experience** -- Improve health and healthcare outcomes for racial and ethnic minorities and for underserved populations and communities
4. **Cultural and Linguistic Competency** -- Improve cultural and linguistic competency
5. **Research and Evaluation** -- Improve coordination and utilization of research and evaluation outcomes

The Health Equity Boards represent one of two primary components of the implementation structure for the National Partnership for Action to End Health Disparities. The structure is based on stakeholder input and includes: (1) Federal coordination; and (2) multi-level, multi-sector Health Equity Boards at the national, regional, Tribal, state, and local levels. The Regional Health Equity Boards will lead and coordinate health disparities improvement actions for their geographic areas or communities (see attachment for the map that corresponds to the 10 regional Boards). Boards will be assisted in their efforts by regional blueprints, created by NPA partners.

Depending on the size of the region, each regional board will comprise 25-35 individuals from the public and private sectors and represent communities impacted by health disparities, state and local government agencies (conducting work on health, education, housing, human services, transportation, agriculture/nutrition, justice, labor, or economic development), tribes, healthcare providers and systems, health plans, businesses, academic and research institutions, or foundations. The Regional Health Equity Boards will function independently of each other to ensure that issues, strategies, and required actions are applicable to the communities in the states that the boards represent.

Responsibilities

Health Equity Board members are expected to:

1. Participate in a minimum of four meetings and/or planning sessions per year to advance the work of the National Plan for Action.
2. Appoint a Chair and Co-Chair to manage discussions and actions for the Board.
3. Board members will serve 1-3 year terms (rotations will be defined by the Board); board members appointed as Chairman and Co-Chairman will serve in appointed position for a 1 year term.
4. Serve as a body of experts for driving a collaborative health equity agenda.
5. Work with key leaders, programs, organizations and other advisory bodies to improve health disparities efforts and that ensure that social determinants of health are addressed in regional blueprints and plans.
6. Refine, through inclusive stakeholder input, priority strategies and actions for implementation and evaluator of the National Plan for Action/regional blueprints.
7. Finalize a regional implementation plan that accounts for primary health and healthcare disparities issues, populations most impacted, healthcare assets and capabilities, existing partnerships/coalitions/alliances focused on health disparities, and opportunities for developing

new partnerships with greater attention focused on risk factors that lead to social conditions of health.

8. Provide recommendations to the NPA evaluator for completing/conducting the national evaluation plan and for developing, as appropriate, additional questions, measures and benchmarks.
9. Support the NPA communications plans by ensuring that stakeholders remain informed and participate in national, regional, or local NPA activities and further establish communication mechanisms through local and regional media to expand national efforts of the NPA goals.
10. Provide planning support and/or recommendations for regional or national NPA events and initiatives.
11. Support and collaborate on projects of mutual benefit including sustainability of cohesive actions in the region.

Criteria

- A. A Board member must work or reside within the home state or territory in the region for which the nomination is submitted.
- B. A Board member must have a passion for the advancement of health equity. Each nominee must possess demonstrated leadership experience through relevant work on policies or programs that seek to eliminate health disparities.
- C. A Board member must have knowledge of issues faced by populations and represent one of the following areas:

1. Regional or state affiliate of national organizations/associations:

- | | |
|-----------------------------------|---------------------------------|
| • Medicine | • Transportation |
| • Public health | • Advocacy |
| • Nursing | • Health care quality |
| • Allied health | • Military |
| • Environmental health | • Labor |
| • Mental and behavioral health | • Employers |
| • Oral health | • Health systems |
| • Education | • Insurance/payors |
| • Housing | • Aging |
| • Veteran's health and well-being | • Health Information Technology |
| • Human services | • Justice |
| • Business | • Economic Development |
| • Agriculture and nutrition | |

2. Community and faith-based organization
3. State, Tribal, or local government employees
4. State, Tribal, or local elected officials
5. Foundations, businesses, or employers
6. Academic or research institutions

Frequently Asked Questions

When is the deadline to be considered to participate on a regional board?

Please see the attached document for nomination deadlines.

Can I recommend someone and/or am I able to participate as a board member?

Yes. Individuals may either recommend someone or themselves if they believe they or that person meets the criteria to be qualified board members.

Who can I contact if I have a question?

If you have questions regarding the nomination process, please send an email to Sophie Tan, NPA Outreach Manager at 240-453-6184 or email sophie.tan@hhs.gov.

What is the National Plan for Action and how was it developed?

The National Plan for Action is one of the components of the NPA and focuses on five objectives: (1) increasing awareness of the significance of health disparities, their impact on the nation, and the actions

necessary to improve health outcomes; (2) strengthening and broadening leadership for addressing health disparities at all levels; (3) improving health and healthcare outcomes for racial and ethnic minorities and underserved populations and communities; (4) improving cultural and linguistic competency; and (5) improving coordination and utilization of research and evaluation outcomes. The other two components include Regional Blueprints that are aligned to the National Plan for Action and targeted initiatives that will be undertaken by public and private sector partners. More information about the NPA can be found at <http://minorityhealth.hhs.gov/npa>.

How many times per year will I be expected to travel?

Board members are expected to participate in meetings and/or planning sessions approximately four times per year. It is anticipated that two of these meetings will be in-person.

Will my travel cost be covered?

Travel costs for non-profit organization representatives which meet travel guidelines will be supported by the Office of Minority Health.

If I am selected to be a Board member, to which region will I be assigned?

Board members will be assigned to the region of the state or territory in which they work or reside.

Who will review the nomination process?

All nominees will be given equal consideration. The nomination process and review of qualifications will be led by review panels established by the Office of Minority Health. The review committee reserves the right to keep all nomination reviews confidential.

When will I know whether I have been accepted as a Board member?

Nominees will be contacted following completion of reviews by the panels.

Why does the National Plan for Action have a strong focus on minority populations? Will other populations also be included?

Disparities for racial and ethnic minorities are persistent and pervasive—they have been documented since federal recordkeeping on the health of the Nation began. There is also evidence that disparities affecting racial and ethnic minorities persist even when there are controls for socioeconomic status, educational attainment, and other factors. Minority populations now comprise of 34 percent of the total U.S. population, are increasing in number faster than the White population, and are expected to represent 40 percent of the United States by the year 2030. As the diversity of our Nation continues to grow, we must assure that all Americans have opportunities for better outcomes.

The National Plan for Action recognizes that other populations also suffer from health disparities. Thus, the strategies and actions embodied in the National Plan for Action are also intended to address health improvements in our communities including for people with disabilities, poor individuals and families, older adults, children, rural and urban populations, lesbian, bisexual, gay, and transgender individuals, veterans and others.

Who will fund the implementation of the National Plan for Action and will new grant funds be available?

The Office of Minority Health (OMH) serves as the lead for the National Plan for Action and is responsible for its implementation. OMH's grant programs address one or more of the objectives of the NPA and limited funds to carry out implementation activities are included in its FY 2010 appropriation. It is unclear whether new grant funds will be come available as a result of their engagement on the NPA.

Can an individual participate as a Board member on both the National and Regional Board?

An individual may only participate on one board at any given time.

If I am not selected to participate on the Regional Board, are there other ways I can be involved with the National Partnership for Action?

Absolutely. The National Plan for Action is a multi-level and multi-sector effort. If a nominee is not selected for the Regional Board, there are opportunities to participate on a State Board. If participating on a State Board is of interest, please email HEB@hhs.gov.

